

**BREVARD COUNTY SHERIFF'S OFFICE**  
**MISSING JUVENILE OR MISSING / ENDANGERED ADULT AFFIDAVIT**

(Attach Recent Photograph of Missing Person to Affidavit)

ENTRADA #118

INTERVIEWING DEPUTY AGENT <i>Det Bruce Dowdy</i>	DATE <i>1/17/07</i>	TIME <i>1150</i>	LOCATION <i>3324 VIRGINIA DR TITUSVILLE FL 32796</i>	CASE REPORT # <i>07-016239</i>
NAME (LAST, FIRST, MIDDLE) <i>MIGDALSKI, LEON R</i>	RACE / GENDER <i>W/M</i>	DATE OF BIRTH <i>3-17-39</i>	TELEPHONE (HOME) <i>267-1008</i>	(WORK) <i>698-3661</i>
HOME ADDRESS <i>3040 LAS PALMAS DR TITUSVILLE FL 32780</i>		WORK ADDRESS <i>RETIRED</i>		

Before me, the undersigned authority, this day personally appeared, LEON R MIGDALSKI, who first being duly sworn, and placed under oath, deposes and swears as follows:  
On the 17 day of JANUARY, 2007, the person described below was discovered missing. The aforesaid complainant is the GRAND FATHER of the following  
(Relationship, ie., Mother, Father, etc.)

**Missing Juvenile or Missing / Endangered Adult (Circle the appropriate one):**

NAME (Last, First, Middle) <i>CARMAN, SHERRI LYNN</i>	RACE / SEX <i>W/F</i>	AGE <i>29</i>	DOB <i>4-4-77</i>	POB (Include City, County & State) <i>TITUSVILLE, FLORIDA</i>
HOME ADDRESS & PHONE # (If Different Than Above) <i>3324 VIRGINIA DRIVE TITUSVILLE FL 32796</i>		EMPLOYER / WORK ADDRESS & PHONE # <i>NONE</i>		
HGT <i>5'7"</i>	WGT <i>125</i>	EYE COLOR <i>HAZEL</i>	HAIR COLOR & STYLE <i>BLONDE / SHOULDERS STRAIGHT</i>	PHYSICAL DEFECTS, SCARS, BIRTHMARK, TATTOOS <i>SMALL TRIBAL TATTOO ON MID BACK</i>
NICKNAMES(S) <i>MIGDALSKI SHERRI LYNN</i>		DRIVER'S LICENSE STATE & NUMBER <i>FL</i>		SOCIAL SECURITY NUMBER <i>593-54-2147</i>
DATE/TIME/PLACE LAST SEEN <i>01/16/07 @ 1100</i>		LAST SEEN WEARING <i>UNKNOWN</i>		POSSIBLY ENROUTE TO <i>UNKNOWN</i>
MEDICAL or MENTAL PROBLEMS / MEDICATIONS / ATTENDING PHYSICIANS <i>MILD MENTAL</i>				
POSSIBLY IN THE COMPANY OF (Name & Address) <i>MICHAEL SHANE TOWNSEND W/M</i>				
VEHICLE DESCRIPTION (Year, Color, Model, Tag #) <i>2002 CHRYSLER 300M - VAG G805BT 4DR 2C3HE66G82H195862</i>				

**V. MISSING / ENDANGERED ADULT**

The aforesaid missing adult is believed to be endangered due to the following reason(s):

POSSIBLE CRIME SCENE LOCATED AT THE  
RESIDENCE

**VI. MISSING JUVENILE**

Has the aforesaid Missing Juvenile been reported as a Runaway or Missing Juvenile previously?

(If Yes, When?) NO

I authorize any Law Enforcement Agency to broadcast a bulletin and to pick up and deliver the child to his/her residence or other authorized facility; and/or I will go and pick up the child.

**VII. ADDITIONAL COMMENTS**

DECAL # 15343552

**VIII. SIGNATURE / OATH**

I swear (or affirm) I have read this statement and it is true and correct to the best of my knowledge so help me God.

YES

Signature of Affiant.

Subscribed and sworn before me, a person authorized by law to administer oaths, this 17 day of JAN, 2007 (year).

Signature of Notary / Law Enforcement Officer in Performance of Official Duties.

Affiant is: ☐ Personally Known ☐ I.D. Produced: